PTO/SB/17 (10-88)

Approved for use through 06/30/2010. OMB 0651-0032

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(A) (4)					olete if Known						
Fees pursuant to the Eonsolidated Appropriations Act, 2005 (H.R. 4818).						10/600,584-Conf. #5497					
FEE TRANSMITTAL			Filing Date	ne 19, 2003							
				First Named Inventor R		Robert W. Blakesley					
For FY 2009				Examiner Name C.		C. M. Babic					
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 16		1637					
TOTAL AMOUNT OF PAYMENT (\$) 1,810.00			0 ,	Attorney Docket	No. 5	55670DIV(45858)					
METHOD OF	PAYMENT (check a	ll that apply)		_							
Check Credit Card Money Order None Other (please identify):											
x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP											
For the a	bove-identified depos	it account, the D	rector is	hereby authorize	d to: (check	all that apply)					
	arge fee(s) indicated					cated below, ex	cept for t	he filing fee			
	arge any additional fe		ments of	x Credit	any overpay	/ments		-			
fee	(s) under 37 CFR 1.1										
FEE CALCUL											
1. BASIC FILING	S, SEARCH, AND EX			NDOLLETEC	EVALUE I	ATION FEES					
	FIL	ING FEES Small Entity	SEA	ARCH FEES  Small Entity	EXAMINA	ATION FEES Small Entity					
Application Ty	pe Fee (\$)	Fee (\$)	Fee (\$		Fee (\$)	Fee (\$)	Fees	Paid (\$)			
Utility	330	165	540	270	220	110					
Design	220	110	100	50	140	70					
Plant	220	110	330	165	170	85					
Reissue	330	165	540	270	650	325					
Provisional	220	110	. 0	0	0	0					
2. EXCESS CLA	IM FEES						Small Entity				
Fee Description							Fee (\$)	Fee (\$)			
Each claim over 20 (including Reissues)						52	26				
Each independer	nt claim over 3 (inclu	ding Reissues)					220	110			
Multiple depend	lent claims						390	195			
			F				pendent Claims				
- 20 or HP x = <u>Fee (\$)</u> Fee Paid (\$)								<u>\$)</u>			
	per of total claims paid for,		_					_			
Indep. Claims		F	Fee Paid (\$)								
- 3 or HP = X = HP = highest number of independent claims paid for, if greater than 3.											
•	· ·	out for, it greater tha									
3. APPLICATIO		ceed 100 sheets o	of paper	excluding electr	onically file	ed sequence or	computer				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50											
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
100 = /50 = (round up to a whole number) x =											
4. OTHER FEE(S) Fees Paid (\$)											
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1501 Utility issue fee 1,510.00  1504 Publication fee for early voluntary or pormal 300.00											
Other (e.g., l	for early, voluntary, or normal			300.00							
		.50			, c						
SUBMITTED BY Signature	Jato.	and Pol	D. J. P	Registration No.	34,901	Telephone	(617) 5°	17-5516			
Signature / Attry U - Wort/ Name (Print/Type) Kathryn A. Piffat, Ph.D., Esq.			(Attorney/Agent)	. ,	Date		5, 2010				
Trans (1 IIII) (Abe)	Radinyii A. i ilat, i		V					.,			



PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
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Under the Paperwork Reduction Act of	1930, no person are rec	direct to t	espend to a concettor		plete if Knowi		ond or Hamber					
Effective on 12/08/ Fees pursuant to the Consolidated Approp	4818).			10/600,584-Conf. #5497								
FEE TRANS	Ė			June 19, 2003								
<del>"</del>	Ī	First Named Inventor Robert W. Bl										
For FY 20		Examiner Name		C. M. Babic								
Applicant claims small entity state	Art Unit 1637											
TOTAL AMOUNT OF PAYMENT	(\$) 1,810.00	(\$) 1,810.00		Attorney Docket No. 5		55670DIV(45858)						
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
X Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP												
For the above-identified depo	osit account, the Dir	ector is	hereby authorize	d to: (che	ck all that apply)							
X Charge fee(s) indicated	d below		Charge	e fee(s) ind	dicated below, ex	cept for the	filing fee					
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION												
1. BASIC FILING, SEARCH, AND E	XAMINATION FEE	s										
FI	LING FEES	SEA	ARCH FEES	EXAMI	NATION FEES							
Application Type Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity ) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	id (\$)					
Utility 330	165	540	270	220	110							
Design 220	110	100	50	140	70							
Plant 220	110	330	. 165	170	85							
Reissue 330	165	540	270	650	325							
Provisional 220	110	0	0	0	0							
2. EXCESS CLAIM FEES							mall Entity					
Fee Description Each claim over 20 (including Reise	mes)					Fee (\$) 52	Fee (\$) 26					
Each independent claim over 3 (inc		220	110									
Multiple dependent claims	, , , , , , , , , , , , , , , , , , , ,					390	195					
Total Claims Extra Claim	F	ee Paid (\$) Mu		/lultiple Depend	iple Dependent Claims							
Total Claims Extra Claims Fee (\$) = Fee (\$)				<u>F</u>	ee (\$)	Fee Paid (\$)						
HP = highest number of total claims paid for	r, if greater than 20.						_					
Indep. Claims Extra Claim	s Fee (\$)	ee Paid (\$)										
HP = highest number of independent claim	s paid for, if greater than	3.										
3. APPLICATION SIZE FEE	1.100 -1	c	(1-4i1-a-	: 11 4	:1.da. a.							
If the specification and drawings e listings under 37 CFR 1.52(e)),	the application size	i paper e fee du	(excluding electric is \$270 (\$135 f	onically i	ned sequence or	dditional 50						
sheets or fraction thereof. See	35 U.S.C. 41(a)(1)(	G) and	37 CFR 1.16(s).	OI SIIIuII (	ontity) for caon a	Garrional 50						
Total Sheets Extra Shee			additional 50 or frac	ction there	of Fee (\$)	Fee P	aid (\$)					
- 100 =			(round up to a who			=						
4. OTHER FEE(S)  Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge	1,510.00 300.00											
1504 Publication fee for early, voluntary, or normal 300.00												
SUBMITTED BY	TI PA	1) 1 /	Registration No. (Attorney/Agent)	34,901	Telephone	(617) 517	-5516					
Name (Print/Type) Kathryn A. Piffat	(Aftorney/Agent)	<del></del> ,301	Date	July 15,								